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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Neugebauer, et al.

Serial No: 09/922,964

Examiner: Maki, Steven D.

Filed: August 6, 2001

Art Unit: 1733

Confirmation No: 1450

For: METHOD OF COMPENSATING FOR RESIDUAL ALIGNING
TORQUE (RAT)

Docket: 1110-WO
P99125US1A

BEST AVAILABLE COPY

Commissioner of Patents
Alexandria, VA 22313

RESPONSE TO FINAL REJECTION

In response to the Final Rejection dated November 4, 2003 received in the above application, please amend said application as set forth on the attached pages, which are believed to be in compliance with the revised format of 37 CFR 1.121.

Amend previously submitted new claim 19 as set forth on the attached claim page.

Amend the Specification to incorporate the description in claim 19 relating to the term "symmetrical" as set forth on the attached page.

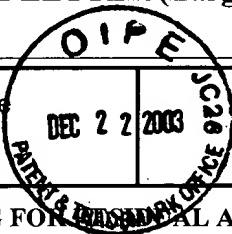

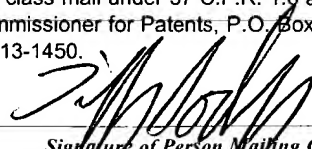
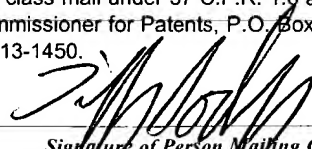
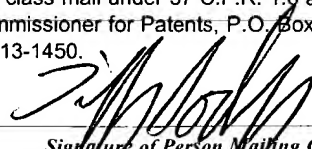
Respectfully submitted this 18TH day of December, 2003.

For: SAND & SEBOLT

By: Michael Sand
Reg. No. 26,503

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AF/1733

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 1110-WO									
Applicant(s): Neugebauer, et al.													
Serial No. 09/922,964	Filing Date 8/6/01		Examiner Steven D. Maki	Group Art Unit 1733									
Invention: METHOD OF COMPENSATING FOR THERMAL ALIGNING TORQUE (RAT)													
<u>TO THE COMMISSIONER FOR PATENTS:</u>													
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.													
CLAIMS AS AMENDED													
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE								
TOTAL CLAIMS	13 -	20 =	0 x	\$18.00	\$0.00								
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00								
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00								
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00								
BEST AVAILABLE COPY													
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 06-0925 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.													
 Michael Sand Reg. No. 26,503 Sand & Sebolt Aegis Tower, Suite 1100 4940 Munson St. NW Canton, OH 44718 330-244-1174			Dated: 12/18/03										
CC:			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I certify that this document and fee is being deposited on 12/18/03 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</td> </tr> <tr> <td colspan="2" style="text-align: center;">  Signature of Person Mailing Correspondence </td> </tr> <tr> <td colspan="2" style="text-align: center;">Tiffany M. Godfrey</td> </tr> <tr> <td colspan="2" style="text-align: center;">Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>			I certify that this document and fee is being deposited on 12/18/03 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		 Signature of Person Mailing Correspondence		Tiffany M. Godfrey		Typed or Printed Name of Person Mailing Correspondence	
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